SUBMIT: COMPLETED APPLICATION, TAX STATEMENT AND FEE TO: Bayfield County
Planning and Zoning Depart.
PO Box 58
Washburn, WI 54891
(715) 373-6138

APPLICATION FOR PERMIT
BAYFIELD COUNTY WISCONS IN

Date Starth (Received)

3

Date:

Bayfield Co. Zoning Dept.

Refund: Permit #: Amount Paid: 2.28-17 \$75 2-13-17 0030

| | LTIES | LTIES | Secretalial Stall # FAILURE TO OBTAIN A PERMIT OF STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES | WITHOUT A PERM | TIME CONCURS OF THE | (70,000) | 0 | | Secretarial State | |
|--|--|--|--|--|-------------------------------------|---|---|---|--|--------|
| Parties and the state of the st | × : | | CANAL STREET | The state of the s | | Other: (explain) | Other: (evolain) | | | |
| | × > | - - | | | | Special Use: (explain) | Special U | | TB 200 2 | |
| *** | × . | - | | And the second s | \$ AAAA | | | 1 | Hêc a for issues a | |
| | × | | |) | literation (specify) | Accessory Building Addition/Alteration | Accessor | | The state of the s | ž. |
| 728 | 26×38) | _ ري | 79e) | y (5torag | 2nd stor | | | | Municipal Use | |
| | | 7 | | | (-) | Addition/Alteration (specify) | Addition | | | |
| | × | | א נססמ טירט ומכווונוכי) | 19 | steeping quarters, | Mobile Home (manufactured da | Mobile u | | | |
| | × | | rooking & food prep facilities) | ? | age of an arrange of a second | } [| Punkhou | | | |
| MANAGEMENT TO SERVICE THE SERV | × × | | | | | with (2") Deck | | 3 | | |
| - Andrews | × | | | | | with a Deck | | <u> </u> | | |
| | × | - | and the second s | | | with (2 nd) Porch | | | | |
| | X) | | | | | with a Porch | | Use | X Residential Use | |
| | × : | | | | sliden, etc.) | with Loft | Vesidence | | | |
| | ×× | - | | | ture on property) | | Principal | | | |
| Footage | Dimensions | , 0 | | re | Proposed Structure | | | | Proposed Use | |
| | | | | \$0 | | | | uchoii, | Flobosed construction | . — |
| 27.0 | Height: | | Sept 5 | 2,82 | Length: | r is relevant to it) | eing applied fo | e: (if permit b | Existing Structure: (if permit being applied for is relevant to it) | |
| | - 1 | 76 | A MOJIE (1. | | | | | | | , |
| plag | * | <u>Z</u> | None | | | Houndation | | Property | | |
| | ontract) | ervice con | □ Portable (w/service c | None None | | - 1 | Run a Business on | □ Run a Bu | | |
| | Vaulted (min 200 gallon) | . Vau | 1 | | | 1 1 | Relocate (existing bldg) | ☐ Relocate | | |
| | Type: Septic | ts) Speci | 🗴 Sanitary (Exists) Specify Type: | - 1 | | 2-Story | on | ☐ Conversion | \$ 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 | |
| | Specify Type: | | ☐ (New) Sanitary | | ✓ Year Round | - 1 | /Alteration | Addition/Alteration | | |
| □ City | THE RESERVE OF THE PROPERTY OF | Ÿ | ☐ Municipal/City | | Seasonal | ☐ 1-Story | New Construction | | material | |
| Water | e of / System perty? | What Type of Sewer/Sanitary System Is on the property? | y Sewer Is or | # of bedrooms | Use | # of Stories and/or basement | ject | Project | Value at Time of Completion * include donated time & | |
| | | | THE RESIDENCE OF THE PROPERTY | - | | | | - | Non-Shoreland | E 3.50 |
| 20 | NO. | teet | 3.0 | 20 | scontinue | If yes | | | 1 1 2 4 | |
| \ 2 | ⊤ X Yes | | cture is from Shoreline: | Distance Structure | d or Flowage | Ns Property/Land within 1000 feet of Lake, Pond or Flowage | ty/Land within | jNs Proper | XShoreland — | |
| ≱ | ls Property in Floodplain Zone? | # | cture is from Shoreline : | Distance Structure | am (ind. Intermittent) | ☐ Is Property/Land within 300 feet of River, Stream Creek or Landward side of Floodplain? If yes | ty/Land withir ndward side o | ☐ Is Proper Creek or La | <i>s</i> | |
| 3,02 | W. | rot size | | Vamakagon | Namon | N, Range 6 W | 43 | Z , Township | Section | |
| Target principles and the second seco | | Subdivision. | סוטנא(צ) ואט. | rous) wo. | \Q\ 2 | ₩ s | 907,100 | | 1/4, | |
| 2(s) <u>507</u> | 1024 Page | /olume | 7000 | 6-03-2 | | Latement) | { | Legal Description: | LOCATION | T |
| No Derty Ownership) | nent ' | Tron River | and the same | 13 Iron 1 | 34 6 | N | | | ch | 7.1 |
| Written Authorization | 7 Written | 0.50 | ₹ | Agent Mailing Address (include& | Agent Phone: | | Barson Siming Application on behalf of Owner(s) | arcon Signing And | | |
| Phone: | Plumber Phone: | | | 54821 Plumber: | ine: | Contract | View K | int-Oc- | 45800 Poin | |
| 1 | 3/1 6/2-300 | V 5 5 | Maple Crove, MN | 2 | 7709 Ranjer Lune City/State/Zip: | 770 | 2 | r Kom | Address of Property: | |
| ne: | Telephone: | 2000 | , Zip: | City/ | Address: | | X E III COL | | Owner's Name: | la co |
| OTHER | | | 24361 | CONTITIONAL ISE | DBIVY I | E BEEN ISSUED TO APPLICA | LL PERMITS HAV | CTION UNTIL A | TYPE OF BEDMIT BEOLIESTED ALL | |
| | | | 100000 | | | INSTRUCTIONS: No permits will be issued until all fees are paid. Checks are made payable to: Bayfield County Zoning Department. | d until all fees ar unty Zoning Dep | nits will be issue e to: Bayfield Co | NSTRUCTIONS: No pern | C == |

Tron Diver W Copy of Tax Statement Fyou recently purchased the property send your Recorded Deed

Date A-2-

Authorized Agent:

(If you are signing on behalf of the ow Iron

jer(s) a le

of authorization mus

etter(s) of authorization

must accompany this application)

Date

Lake

Address to send permit 2073

| (4) Show: (5) Show: (6) Show any (*): (7) Show any (*): | All Existing Structures on your Proper (*) Well (W); (*) Septic Tank (ST); (*) (*) Lake; (*) River; (*) Stream/Creek; (*) Wetlands; or (*) Slopes over 20% | All Existing Structures on your Property (*) Well (W); (*) Septic Tank (ST); (*) Drain Field (DF); (*) Holding Tank (HT) and/or (*) Privy (P) (*) Lake; (*) River; (*) Stream/Creek; or (*) Pond (*) Wetlands; or (*) Slopes over 20% | (HT) and/or (*) Privy (P) | |
|--|---|---|---|--|
| | 5cc 9+ | atadment(s) | | |
| Please complete (1) (7) above (prior to continuing) (8) Setbacks: (measured to the closest point) | o continuing) | Changes in plans must be approve | ust be approved by the Planni | d by the Planning & Zoning Dept. |
| Description | Measurement | Description | N | Measurement |
| Setback from the Centerline of Platted Road Setback from the Established Right-of-Way | id 1504 Feet | Setback from the Lake (ordinary has betback from the River, Stream, Control Setback from the Bank or Bluff | high-water mark) 3, Creek | 36,5 Feet |
| Setback from the North Lot Line Setback from the South Lot Line Setback from the West Lot Line | 497 Feet NA Feet 23'4 Feet | Setback from Wetland 20% Slope Area on property | XX. | |
| Setback from the West Lot Line Setback from the East Lot Line | ' | 20% Slope Area on property Elevation of Floodplain | X Yes | |
| Setback to Septic Tank or Holding Tank Setback to Drain Field | 7 Feet √ 4 Feet | Setback to Well | · · | 100.4 Feet |
| Setback to Privy (Portable, Composting) Feet Frior to the placement or construction of a structure within ten (10) feet of the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner or marked by a licensed surveyor at the owner's expense. Prior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from prior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from the proposed site of the proposed site of the structure, or must be | n (10) feet of the minimum required setback, the reyor at the owner's expense. In ten (10) feet but less than thirty (30) feet from the corner, or verifiable by the Department by use | Feet | ured must be visible from one previously which the setback must be measured 500 feet of the proposed site of the structure. | previously surveyed corner to the measured must be visible from of the structure, or must be |
| (9) Stake or Mark Proposed (9) Stake or Mark Proposed NOTICE: All Land For The Construction Of Notice o | Use Permits Expire One (1) Year from ew One & Two Family Dwelling: ALL he local Town, Village, City, State or | Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W). NOTICE: All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun. For The Construction Of New One & Two Family Dwelling: All Municipalities Are Required To Enforce The Uniform Dwelling Code. The local Town, Village, City, State or Federal agencies may also require permits. | Iding Tank (HT), Privy (P), and Use has not begun. The Uniform Dwelling Code. its. | d <u>Well</u> (W). |
| Issuance Information (County Use Only) Permit Denied (Date): | nly) Sanitary Number: Reason for Denial: | # of bedrooms: | Sanitary Date: | |
| Permit # 17-0030 | Permit Date: 2-28 | 317 | | |
| ship □ Ye ning □ Ye | S (Deed of Record) S (Fused/Contiguous Lon(s)) S (Fused/Contiguous Lon(s)) | Mitigation Required ☐ Yes ☑ No Mitigation Attached ☐ Yes ☑ No | o Affidavit Required o Affidavit Attached | □Yes ZNo □Yes ZNo |
| Granted by Variance (B.O.A.) □ Yes □ No Case #: | | Previously/Granted by Variance (B.O.A.) ☐ Yes ☑ No | Case #: (1) | |
| ally Created Delineated | ZYes □ No | Were Property Lines Represented by Owner Was Property Surveyed | y Owner & Yes Surveyed & Yes | □ No |
| Inspection Record: NOW (o.c. Co.~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~ | Spricher | | Zoning District Lakes Classification | (R-1) |
| Date of Inspection: 2, 36 7 Inst | pected by: 9 | (If No they need to be attached.) | Date of Re-Inspection: | :tion: |
| Not & home b | | NY TREE OF BE GREETING. | | |
| Row | | | Date of Approval: | wal: 22817 |
| Hold For Sanitary: 🗆 0 Hold For TBA: | BA: Hold For Affidavit: | lavít: 🗌 Hold For Fees: 🗎 | | |

ELEVATION DETAIL

THE ESTABLISHMENT OF A BENCHMARK ON LOT 3 OF BAYFIELD COUNTY CERTIFIED SURVEY MAP NO. 1663. RECORDED ON PAGE 6 IN VOLUME OF CSM AND LOCATED IN GOVERNMENT LOT 7 OF SECTION 3, T. 43 N., R. 6 W., IN THE TOWN OF NAMAKAGON, BAYFIELD COUNTY, WISCONISN

SURVEYOR'S CERTIFICATE

I. PETER A. NELSON, PROFESSIONAL LAND SURVEYOR IN THE STATE OF WISCONISM, HEREBY CERTIFY:

THAT ON THE ORDER OF JAMES DEROMA, I HAVE ESTABLISHED A BENCHMARK ON LOT 3 OF BAYFIELD COUNTY CERTIFIED SURVEY MAP NO. 1663, RECORDED ON PAGE 6 IN VOLUME OF CSM AND LOCATED IN GOVERNMENT LOT 7 OF SECTION 3, T. 43 N., R. 6 W., IN THE TOWN OF NAMAKAGON, BAYFIELD COUNTY, WISCONSIN;

THAT THIS MAP A TRUE REPRESENTATION OF SAID SURVEY, AND THAT SAID SURVEY AND MAP ARE CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF.

SURVEN

NOTE:

ELEVATIONS ARE NAVD(88) IN FEET,

ON-SITE BENHCMARK (BM 1) - TOP OF CONCRETE APRON AT 3'# SOUTHERLY AND 10'± WESTERLY OF SOUTHEAST CORNER OF THE BOATHOUSE. ELEVATION = 1398.55°

THE EXTERIOR BOUNDARY OF LOT 3, SHOWN HEREON, IS APPROXIMATE AND FOR REFERENCE ONLY, REFER TO CSM NO. 1863 AS RECORDED ON PAGE 6 IN VOLUME 10 OF CSM FOR PROPERTY INFORMATION.

THE PURPOSE OF THIS SURVEY IS TO ESTABLISH AN ON-SITE BENCHMARK.

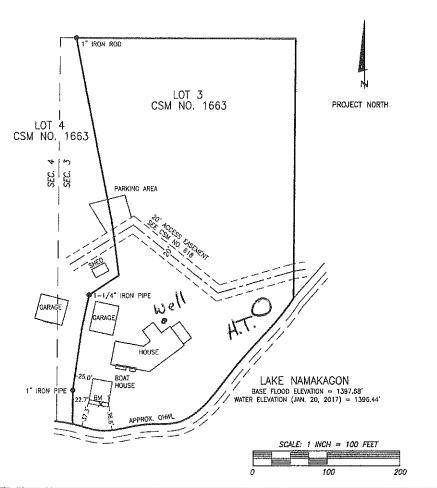
FIELD SURVEY COMPLETED ON JANUARY 20, 2017.

CLIENT: DEROMA, JAMES 9 FOUND MONUMENT, AS NOTED JOB NO.: N16/205 SCALE: 1 INCH = 100 FEET JAN. 31, 2017 NB. 404 PG, 121

DRAFTED BY: P. NELSON N/T43NR6W/SEC3/ ACAD/N16, 205_DEROMA.DWG PSDATA/N16_204&N06134

NELSON SURVEYING INCORPORATED SURVEYING YOUR HECK OF THE WOODS SINCE 1964 101 W. MAIN STREET SURE 100 ASHLAND, WISCONSIN 54806 (715) 682-2692 (713) 002-2092 FAX: (715) 682-5100 MAP<u>NO. CSM 2888</u> ©

2888



STATEMENT AND FEE TO: Bayfield County
Planning and Zoning Depart.
PO Box 58
Washburn, WI 54891
(715) 373-6138

BAYFIELD COUNTY, WISCONSIN 0207

Bayfield Co. Zoning Dept

| Refund: | | Amount Paid: | Date: | Permît #: |
|---------|---------------|--------------|---------|-----------|
| ٩ | (+8250 OSITE) | #1075 228-17 | 2-28-17 | 17.02.50 |

INSTRUCTIONS: No permits will be issued until all fees are paid.
Checks are made payable to: Bayfield County Zoning Department.
DO NOT START CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN ISSUED TO

| City AD Jac AD Jac Agen Signing Application on behalf of Owner(s)) 1/5 Agen A |
|--|
| Crty/State |
| City City City City City City Cont |
| Legal Description: (Use Tax Statement) Lot(s) Cont |
| City City City City City City Contact City Contact City City Contact City |
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| Creek or Landward side of Floodplain? Convertis) Agent Pho Ceek or Landward side of Floodplain? If yes—Convertion Addition/Alteration Addition/Alteration Aconvertis Addition/Alteration Aconvertis Addition/Alteration Aconvertis Addition/Alteration Aconvertis Aconvertis Addition Aconvertis Aconvertis Addition Aconvertis Aconvertis Addition Aconvertis |
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| Cresson Signing Application on behalf of Owner(s)) Agent Pho Cell Ag |
| City/State |
| City/State City C |
| City/State G.f. b. 0. D.f. V.e. C. C. M.f. Person Signing Application on behalf of Owner(s)) Agent Pho Contractor C. Agent Pho Contractor C. Agent Pho C. Agen |
| City/State City/State City/State City/State City/State City/State City/State Contractor Contractor Contractor City/State Cit |
| Creck or Landward side of Floodplain? City/State City/State Crontractor Contractor C |
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| City/State |
| (Person Signing Application on behalf of Owner(s)) Legal Description: (Use Tax Statement) City/State Contractor Capt Pho Agent Pho PIN: (23 di |
| Person Signing Application on behalf of Owner(s)) Person Signing Application on behalf of Owner(s)) Agent Pho Cell 1-715-55 |
| City/state CAR Contractor C |
| Harmon Drive CHAR Contractor TIS-78 |
| of Property: City/State |
| City/State |
| |
| できる。 |
| Owner's Name: 0 10 / 8 00 / 8 5 Mailing Address: |

FAILURE TO OBTAIN A PERMIT OF STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES

[(we) declare that this application (including any accompanying information) has been examined by me (us) and to the best of my (our) knowledge and belief it is true, correct and complete. I (we) acknowledge that I (we) am (are) providing and that it will be relied upon by Bayfield County in determining whether to issue a permit. I (we) further accept liability which may be a result of Bayfield County relying on this information I (we) am (are) providing in or with this application. I (we) consent to county officials charged with administering county ordinances to have access to the above described property at any personal providing in or with this application. Wipose . All Owners must sign \underline{or} letter(s) of authorization must accompany this application) Date

Owner(s): (If there ar

Authorized Agent:

=

you are signii

ig on behalf of the

Address to send permit Scot

Haai

 $\tilde{\circ}$ (s) Kavanavgh \$ /b/~ 5

Date

6

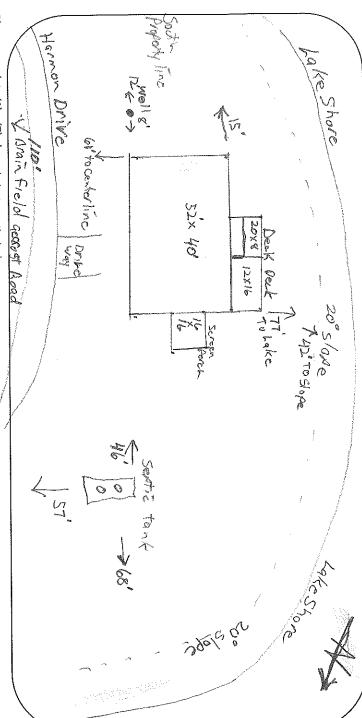
 $\frac{Attach}{5 \text{ H} \Sigma}$ Copy of Tax Statement and property send your Recorded Deed

- **Show Location of:** Show / Indicate:
- (1) (2) (3) (4) (6) (7) Show Location of (*):
 - Show:

Show:

- Proposed Construction
 North (N) on Plot Plan

 (*) Driveway and (*) Frontage Road (Name Frontage Road)
 All Existing Structures on your Property
 (*) Well (W); (*) Septic Tank (ST); (*) Drain Field (DF); (*) Holding Tank (HT) and/or (*) Privy (P)
 (*) Lake; (*) River; (*) Stream/Creek; or (*) Pond
 (*) Wetlands; or (*) Slopes over 20%
- Show any (*): Show any (*):



Please complete (1) - (7) above (prior to continuing)

Changes in plans must be approved by the Planning & Zoning Dept.

Setbacks: (measured to the closest point)

| | | Feet | Setback to Privy (Portable, Composting) |
|-------------|--|-------------|---|
| | | /5 Feet | Setback to Drain Field |
| / 12 Feet | Setback to Well | 57 Feet | Setback to Septic Tank or Holding Tank |
| | | | |
| 77./3 Feet | Elevation of Floodplain | 3) Feet | Setback from the East Lot Line |
| | 20% Slope Area on property | T Feet | Setback from the West Lot Line |
| | Setback from Wetland | ∫ Feet | Setback from the South Lot Line |
| 3 | | Feet | Setback from the North Lot Line |
| 72 Feet | Setback from the Bank or Bluff | | |
| Feet | Setback from the River, Stream, Creek | Feet | Setback from the Established Right-of-Way |
| 77 Feet | Setback from the Lake (ordinary high-water mark) | 6/ Feet | Setback from the Centerline of Platted Road |
| | | | |
| Measurement | Description | Measurement | Description |
| | | | |

Prior to the placement or construction of a structure within ten (10) feet of the minimum req other previously surveyed corner or marked by a licensed surveyor at the owner's expense.

nent or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from veyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be set surveyor at the owner's expense.

Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W).

NOTICE: All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun. For The Construction Of New One & Two Family Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwelling Code The Construction Of New One & Two Family Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwelling Code

| | Hold For Fees: | davit | Hold For Affidavit: | Hold For TRA | TO T |
|--|--|---|--|--|--|
| Date of Approval: 2-28-17 | | | | ctor: 21 | Signature of Inspector: |
| | ached.) | □ Yes | 医乳腺性 医乳腺性 医多克氏虫虫 | Condition(s):Town, Committee or Board Conditions Attached? Mw 汁 ちょと いひこ | Condition(s):Town, Committee of Mush St. St. 40C |
| Date of Re-Inspection: | | ules | Inspected by: | Date of Inspection: コンクンイコ | Date of Inspection |
| Zoning District (\mathcal{PAP}) Lakes Classification $($ | | | | | Inspection Record: |
| Lyes no | Were Property Lines Represented by Owner Was Property Surveyed | Were Property Lir | | Was Parcel Legally Created ✓ Yes □ No Was Proposed Building Site Delineated ✓ Yes □ No | Was Was Proposed B |
| | y Variance (B.O.A.) Case #: | Previously Granted by Variance (B.O.A.) ☐ Yes ☐ No | And the second s | ce (B.O.A.) Case #: | Granted by Variance (B.O.A.) |
| Affidavit Required ☐ Yes ∠ No Affidavit Attached ☐ Yes ∠ No | Yes ZNO | Mitigation Required Mitigation Attached | z'no us Lot(s)) Z'No Z'No | Is Parcel a Sub-Standard Lot | Is Parcel a Sub-Standard Lot Is Parcel in Common Ownership Is Structure Non-Conforming |
| | | 2-28-17 | Permit Date: ス-ム | 3 | Permit #: 17-04362 |
| | | | Reason for Denial: | (e): | Permit Denied (Date): |
| Sanitary Date: | # of bedrooms: | 17-015 | Sanitary Number: // | Issuance Information (County Use Only) | Issuance Infor |